			Docket Number (Optional)
PETITION FOR EXTENSION OF TIME UNI			D/A 3267 (1508/3940)
CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop <u>Amendment</u> , Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313- 1450, or being facsimile transmitted to the USPTO		In re Application of Lisa S. Purvis et al. Application Number 10/757,688 Filed 1/14/2004 For A SYSTEM AND METHOD FOR DYNAMIC DOCUMENT LAYOUT	
at, on		Group Art Unit 2178	Examiner Wilson Tsui
Signature: Name:			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and appropriate entity fee are as follows (check time period desired):			
	\Box One month (37 CFR 1.1	7(a)(1)) - (\$65/\$130)	\$
	\Box Two months (37 CFR 1.	T wo months (37 CFR 1.17(a)(2)) - (\$245/\$490)	
	Three months (37 CFR 1	Three months (37 CFR 1.17(a)(3)) - (\$555/\$1110)	
	\Box Four months (37 CFR 1.	Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730)	
	\Box Five months (37 CFR 1.	☐ Five months (37 CFR 1.17(a)(5)) - (\$1175/\$2350)	
	Applicant claims small entity status.		
	A check to cover the fee is enclosed.		
	Payment by credit card. Form PTO-2038 is attached.		
	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		
×	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>141138</u> . I have enclosed a duplicate copy of this sheet.		
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the D applicant/inventor			
	 assignee of record of the enclosed. (Form PTO/S attorney or agent of record 		tatement under 37 CFR 3.73(b) is
	 attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) /Gunnar G. Leinberg/ 		
	Signature	2	Date
	Gunnar G. Leinber		(585) 263-1014
	Typed or printed n	ame	Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
Total of forms are submitted.			